

American Samoa Stand-Alone Prescription Drug Plans

* The beneficiary drug premium covers prescription drugs only and does not cover medical or hospital benefits. Beneficiaries are also responsible for their Part B premium and any premiums for Medigap coverage to meet their individual needs.

Includes contracts/plans approved as of October 10, 2005. The data does not reflect information for PACE organizations, Employer sponsored plans, or plans that were not approved by the "As of" date of the chart.

Description		Cost					Coverage			Convenience	
Organization Name	Plan Name	Beneficiary Total Drug Plan Premium*	No Premium with Full Low Income Subsidy	Drug Deductible			Includes Tiered Copay- ments for Drugs	Type of Additional Coverage Offered in Drug Coverage Gap		Number of Top 100 Drugs on Formulary	Mail Order Offered
				Zero	Reduced	Standard (\$250)		Generics Only	Generics and Brands		
		United Healthcare	AARP MedicareRx Plan	\$29.55		•			•		